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APPLICANTS

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**** CONTINUING DATA *******

This application is a 371 of PCT/US04/11153 04/12/2004
 which is a CON of 10/412,751 04/11/2003 PAT 7,352,887
 which is a CON of 10/412,723 04/11/2003 PAT 7,319,734
 which is a CON of 10/412,736 04/11/2003 PAT 7,092,482

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

** 01/26/2007

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	CO	14	75	15
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

HOLOGIC , INC.
 250 CAMPUS DRIVE
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TITLE

SCATTER REJECTION FOR COMPOSITE MEDICAL IMAGING SYSTEMS

FILING FEE RECEIVED 6180	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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